

BEST AVAILABLE COPY

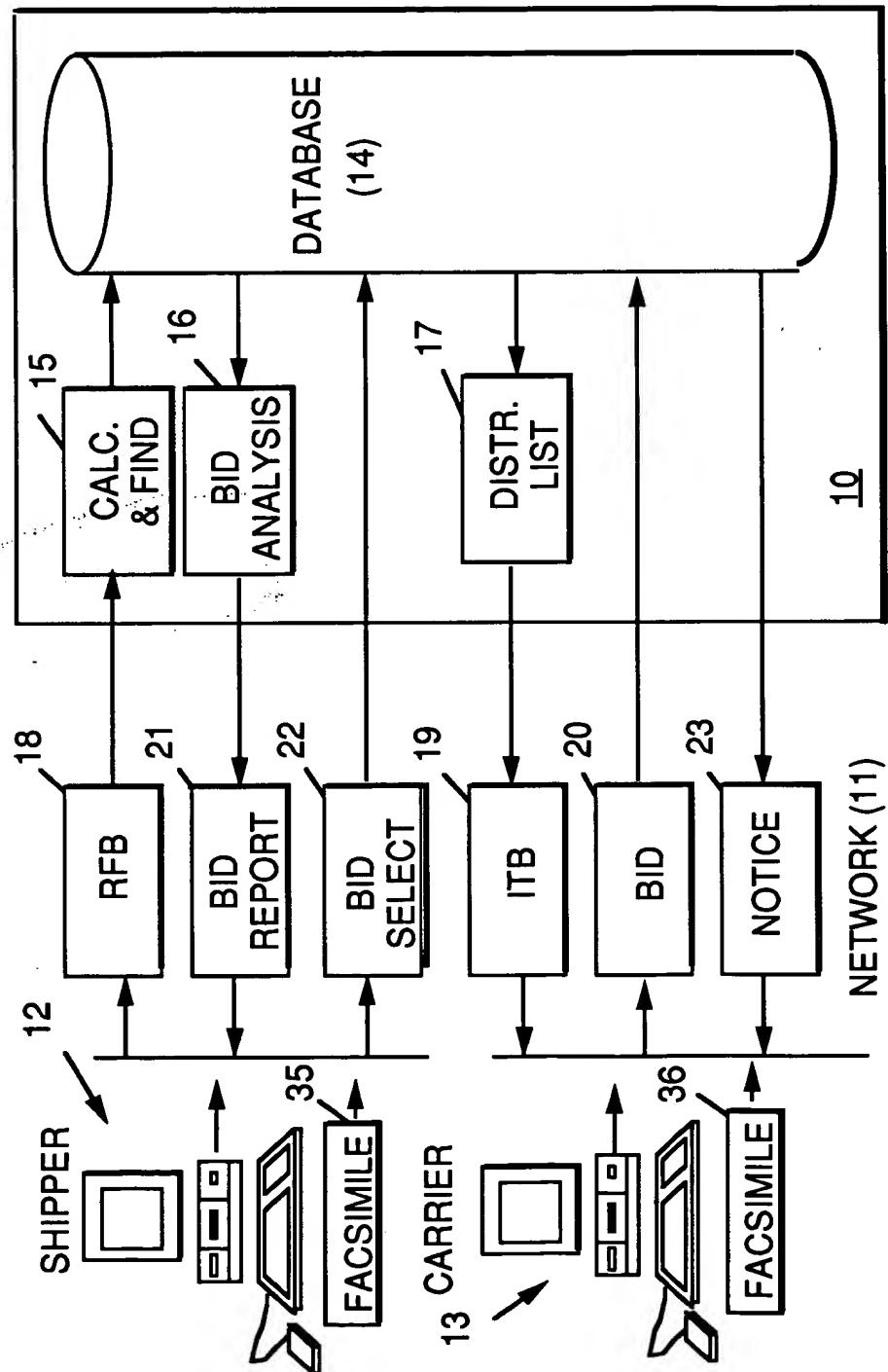


FIG. 1

09/25/1997 12:28:00

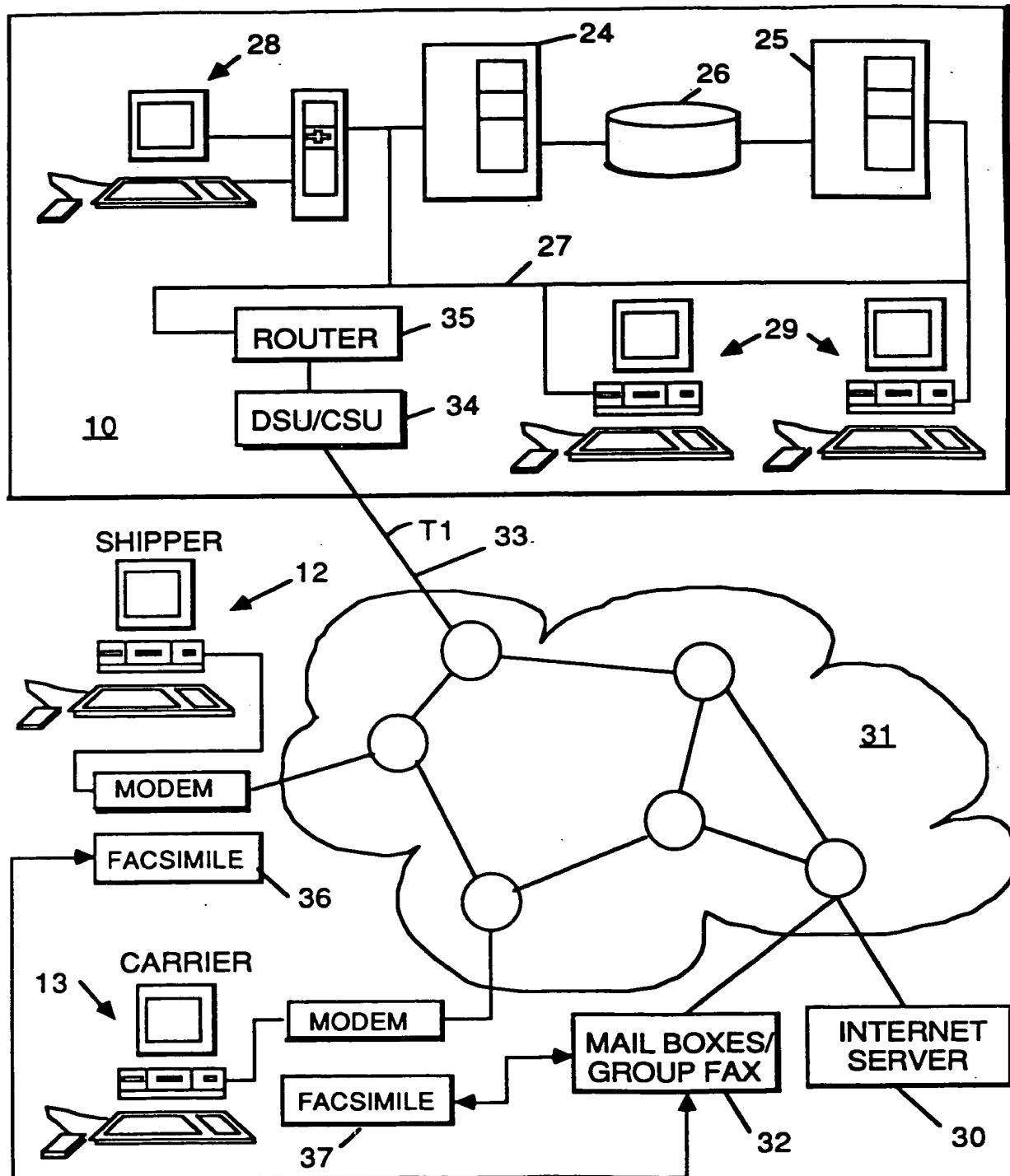


FIG. 2

Load Description

45

Commodity being Shipped:	<input type="text"/>	Last Accepted Bid Date & Time (24 Hr. Local)	<input type="text"/> <input type="text"/>
Shipper Load ID:	<input type="text"/>	Date Carrier Must Hold Bid Until:	<input type="text"/> <input type="text"/>
Weight of the Load:	<input type="text"/>	MM/DD/YY HH:MM	<input type="text"/> <input type="text"/>
Both weight and units:	<input type="text"/>		<input type="text"/> <input type="text"/>
Number of Lanes to Ship Load:	<input type="text"/>	Pallet Exchange?	<input type="checkbox"/>
1 <input checked="" type="checkbox"/> *	<input type="text"/>	Number of Pallets:	<input type="text"/> <input type="checkbox"/>
Maximum Bid Amount (USS):	<input type="text"/>	Hide Max Bid from Carrier:	<input type="checkbox"/>
Matching Method:	<input type="text"/>	Distribution List Codes:	<input type="text"/>
Normal Matching	<input checked="" type="checkbox"/>		<input type="text"/>

* Please explain Loads that are to be shipped more than once in the Description/Directions Box

Fig. 3a

Load Destinations

Origin State	City	State	Country	Zip or Postal Code	Pickup/Delivery (MM/DD/YY)	Time 24Hr Load (HH:MM)	Plus Load (HH:MM)	Virus (HH:MM)
AL		USA	<input checked="" type="checkbox"/>	<input type="text"/>	<input type="text"/> <input type="text"/>			
AL		USA	<input checked="" type="checkbox"/>	<input type="text"/>	<input type="text"/> <input type="text"/>			
Destin.	Sops Order	1	<input checked="" type="checkbox"/>	<input type="text"/>	<input type="text"/> <input type="text"/>			
		2	<input checked="" type="checkbox"/>	<input type="text"/>	<input type="text"/> <input type="text"/>			
		3	<input checked="" type="checkbox"/>	<input type="text"/>	<input type="text"/> <input type="text"/>			
		4	<input checked="" type="checkbox"/>	<input type="text"/>	<input type="text"/> <input type="text"/>			
		5	<input checked="" type="checkbox"/>	<input type="text"/>	<input type="text"/> <input type="text"/>			

Carrier Requirements

47

Load Type	Transport Modes	Interlining Allowed	Communications	Hazardous Licenses Required
<input type="checkbox"/> TL	Rail	<input type="checkbox"/> NA <input checked="" type="checkbox"/>	<input type="checkbox"/> NA <input checked="" type="checkbox"/>	<input type="checkbox"/> NA <input checked="" type="checkbox"/>
<input type="checkbox"/> LTL	Air	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> CL	Ship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> LCL	Truck	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/> N/A <input checked="" type="checkbox"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> N/A <input checked="" type="checkbox"/>

Equipment Requirements

Other Equipment Supplied	Equipment Class	Equipment Type	Equipment Weight
<input type="checkbox"/> Yes	<input type="checkbox"/> Trailer <input checked="" type="checkbox"/>	<input type="checkbox"/> N/A <input checked="" type="checkbox"/>	<input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	<input type="checkbox"/> N/A <input checked="" type="checkbox"/>	<input type="checkbox"/> N/A <input checked="" type="checkbox"/>	<input type="checkbox"/> N/A <input checked="" type="checkbox"/>

Add any further description/directions Here:

Origin Company:	Destin. Company:
Street Address:	Street Address:
City, State, Zip:	City, State, Zip:
Telephone, Fax:	Telephone, Fax:
Contact Name:	Contact Name:
Other Details:	

Fig. 3b

<input type="checkbox"/> Click Here when Done.	<input type="checkbox"/> Click Here to Clear the Form
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43
44

 <p>IAIN Load Matching - Freight Matching - Newsgroup</p>		
<p>Home Contact Us Help</p> <p>Logout</p>		
<p>Back Forward Reload Home Search Newsgroup Security Stop</p> <p>Bookmarks Location http://www.iain.com/Tour/Shipper_Demo.html</p> <p>Recent Messages New Web Page People Pages Download New & Cool Chances</p>	<p><input type="checkbox"/> (F) What's Related</p> <p><input type="checkbox"/> Last Accepted Bid Time</p> <p><input type="checkbox"/> Carrier Must Hold Until Time</p> <p><input type="checkbox"/> Shipper Load ID</p>	
<h2>Complete Request For Bid Demo</h2>		
<p>Last Accepted Bid Date <input type="text"/></p> <p>Carrier Must Hold Until Date <input type="text"/></p> <p>Shipper Load ID <input type="text"/></p>		
<p>Load Type</p> <p><input checked="" type="radio"/> TL</p> <p><input type="radio"/> LTL</p> <p><input type="radio"/> CL</p> <p><input type="radio"/> LCL</p>		
<p>Transport Mode</p> <p>Either/OR</p> <p>Air</p> <p>Rail</p> <p>Ship</p> <p>Truck</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>		
<p>Simple RFB</p> <p>Complete RFB</p> <p>Bid Summary</p> <p>New Services</p> <p>Home</p>		
<p>Stops</p> <p>Carrier Qualifications</p> <p>Load Description</p> <p>Additional Information</p> <p><input type="checkbox"/> Add Equipment</p>		
<p>Start Post Bid Done IAIN Load Matching Help Logout 350PM</p>		

Fig. 3c

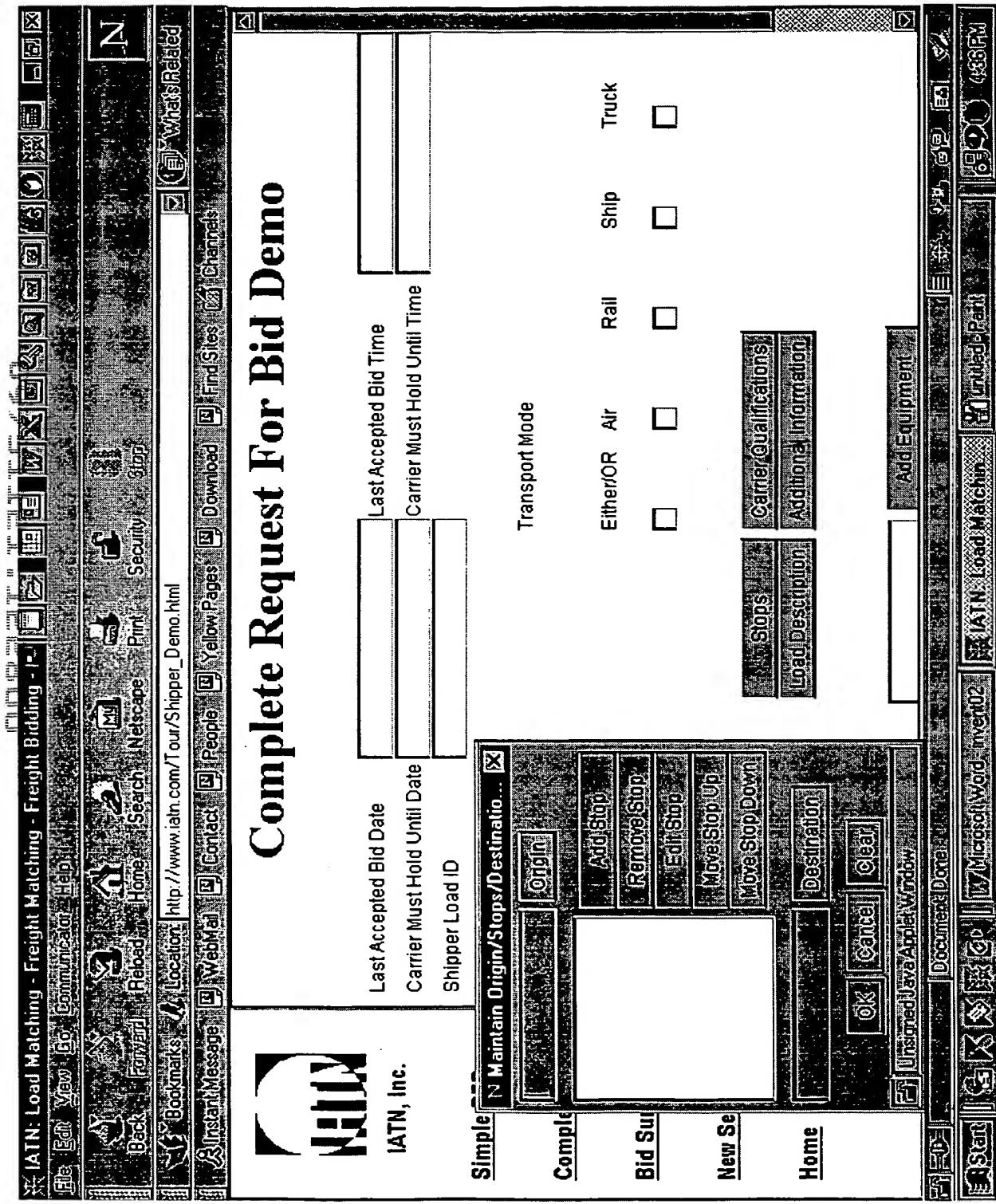


Fig. 3d

Fig. 3e

IATN Load Matching - Freight Matching - Truckload Matching - Volume

File Edit View Co. Communication Help

Back Forward Reload Home Search Netscape Print Stop Security Stop

Bookmarks Locator http://www.iatn.com/Iou/Shipper_Demo.html

& Instant Message Webmail People Yellow Pages Download New & Used Chatrooms

N

Complete Request For Bid Demo

Last Accepted Bid Date
Carrier Must Hold Until Time

Additional Information Enter Additional Information Below Transport Mode

Either/OR Air Rail Ship Truck

Carrier Qualifications Add Equipment

Unsigned Data & Application Window OK Cancel Clear

Start IATN: Load Matching Unutilized Points NQ & ES 3:59 PM

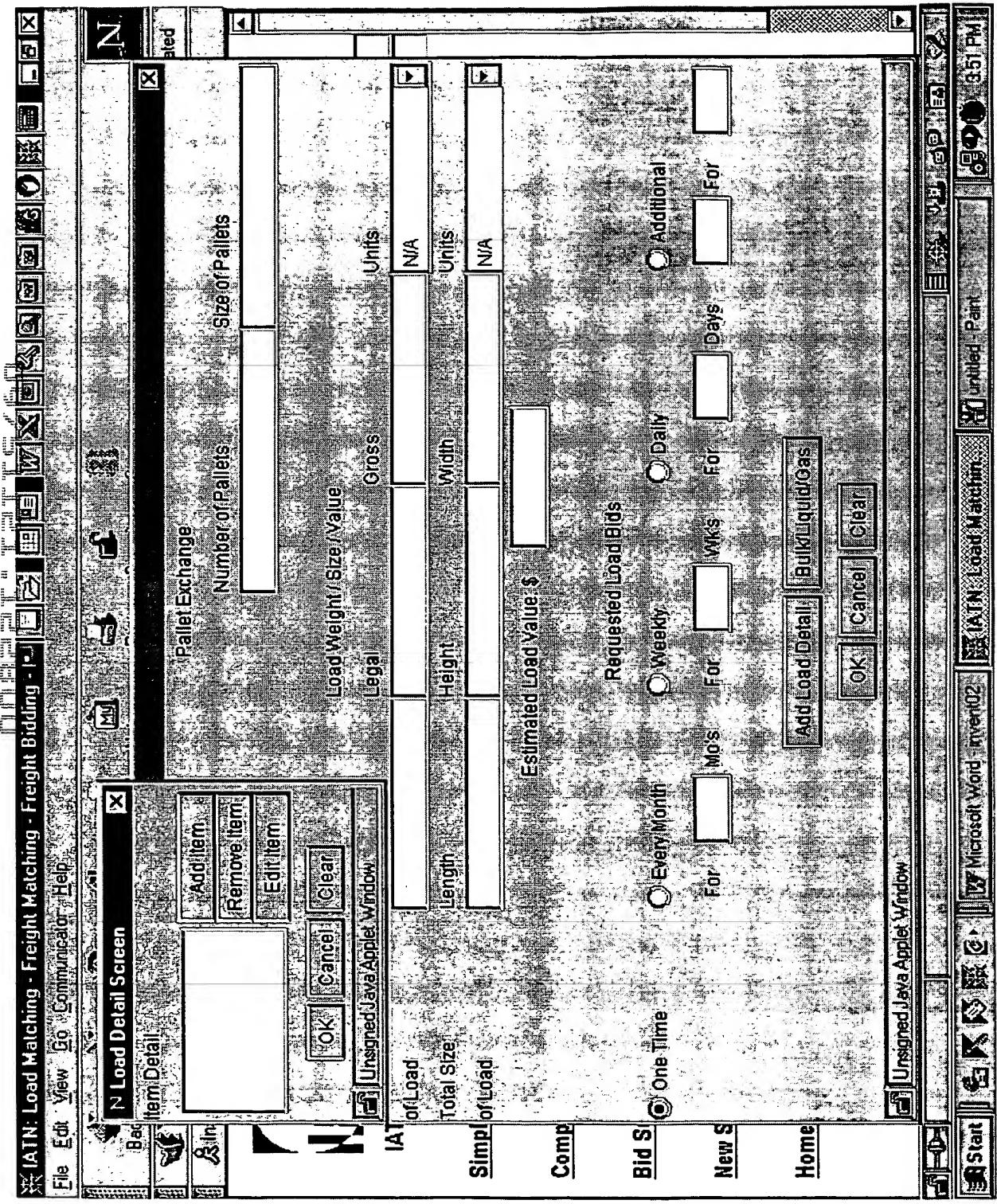


Fig. 3f

Fig. 3g

IATN: Load Matching - Freight Matching - Freight Bidding - []									
<input type="button" value="File"/> <input type="button" value="Edit"/> <input type="button" value="View"/> <input type="button" value="Communication"/> <input type="button" value="Help"/>	<input type="button" value="Home"/> <input type="button" value="Logout"/> <input type="button" value="Reload"/>								
<input type="button" value="Back"/> <input type="button" value="Forward"/> <input type="button" value="Search"/> <input type="button" value="Print"/> <input type="button" value="Security"/> <input type="button" value="Help"/>	<input type="button" value="Bookmarks"/> <input type="button" value="Instant"/>								
									
IATN: Equipment Type - Trailer Detail									
<input type="checkbox"/> What's Related									
<input type="checkbox"/> E-mail									
<input type="checkbox"/> Van Type	<input type="checkbox"/> Van Air Ride	<input type="checkbox"/> Straight Truck	<input type="checkbox"/> Van	<input type="checkbox"/> Van Air Ride	<input type="checkbox"/> Van Air Ride, heated	<input type="checkbox"/> Van w/Curtains	<input type="checkbox"/> Van or Flatbed	<input type="checkbox"/> Van, heated	<input type="checkbox"/> Insulated Van
<input type="checkbox"/> MaxTrailerLength	<input type="checkbox"/> N/A	<input type="checkbox"/> MinExtendables	<input type="checkbox"/> N/A	<input type="checkbox"/> NoOfTrailers	<input type="checkbox"/> N/A	<input type="checkbox"/> MinFactorAgeYears	<input type="checkbox"/> MaxFactorAgeYears	<input type="checkbox"/> NoOfWheels	<input type="checkbox"/> MinNoAxes
<input type="checkbox"/> SimpleRF	<input type="checkbox"/> N/A	<input type="checkbox"/> Complete	<input type="checkbox"/> N/A	<input type="checkbox"/> UnGatedService	<input type="checkbox"/> N/A	<input type="checkbox"/> Tactor(Power Only)	<input type="checkbox"/> SleeperTactor	<input type="checkbox"/> Ship	<input type="checkbox"/> Truck
<input type="checkbox"/> BidSummary	<input type="checkbox"/> N/A	<input type="checkbox"/> Unsigned Java Applet Window	<input type="checkbox"/> Home	<input type="button" value="OK"/>	<input type="button" value="Cancel"/>	<input type="button" value="Clear"/>	<input type="button" value="AddEquipment"/>	<input type="button" value="RemoveEquipment"/>	<input type="button" value="EditEquipment"/>
<input type="button" value="SubmitRFB"/> <input type="button" value="CancelRFB"/>		<input type="button" value="Document Done"/>		<input type="button" value="New Service"/>		<input type="button" value="Signed Java Applet Window"/>			
<input type="button" value="Start"/>		<input type="button" value="Stop"/>		<input type="button" value="Exit"/>		<input type="button" value="Signed Java Applet Window"/>			

Fig. 3h

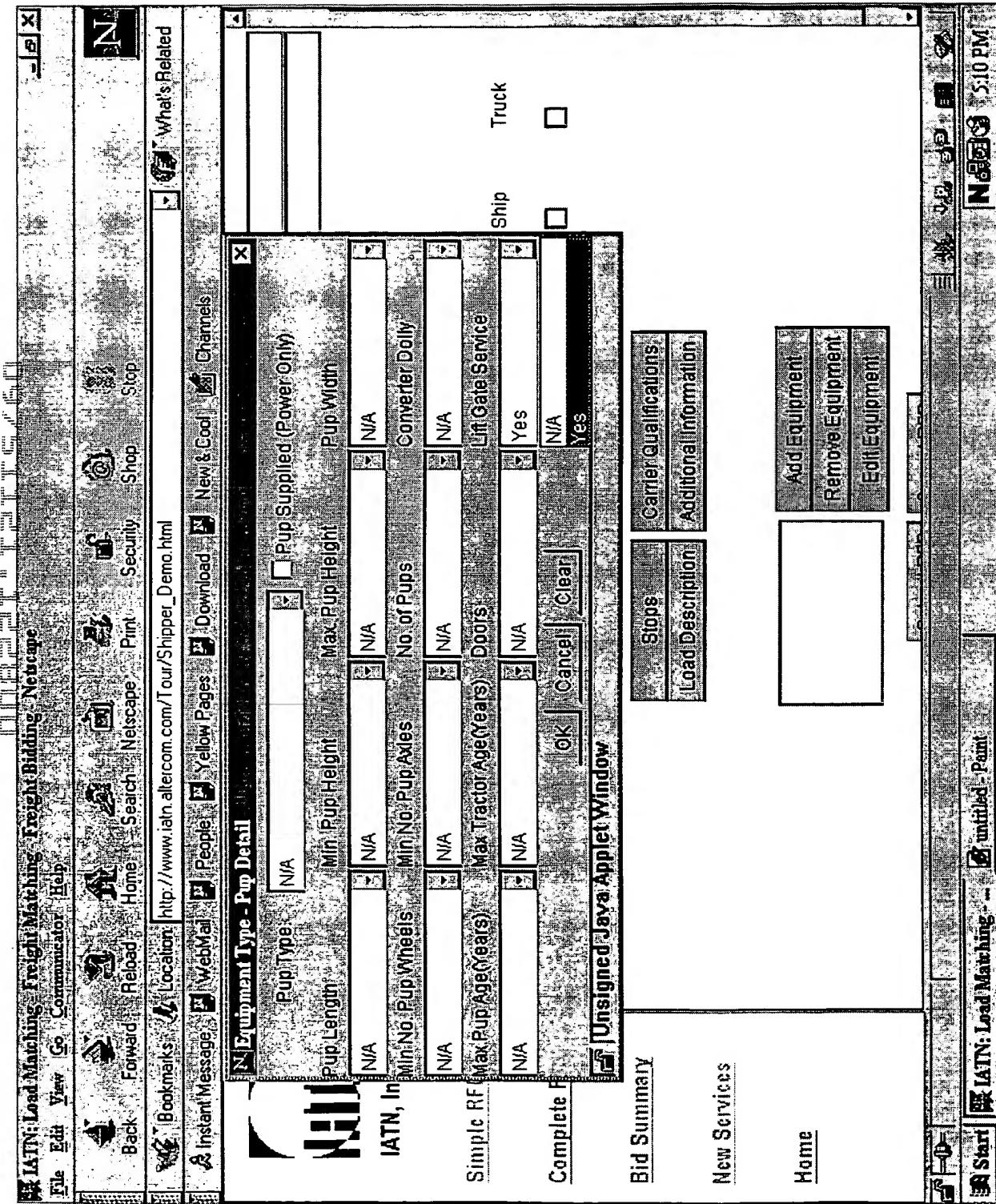


Fig. 3i

NAVIN Logistic Company - Bid Management	
Edit	View
Commons	Hub
Logout	
Equipment Type - Container Detail	
Container Length	<input type="text" value="N/A"/>
Container Width	<input type="text" value="N/A"/>
Container Height	<input type="text" value="N/A"/>
Container Age (Years)	<input type="text" value="N/A"/>
Max Tractor Age (Years)	<input type="text" value="N/A"/>
Max Gate Service	<input type="text" value="N/A"/>
Carrier Qualifications	<input type="checkbox"/> Container Supplied (Power Only) <input type="checkbox"/> Container Supplied (Power & Light)
No. of Containers	<input type="text" value="N/A"/>
Carrier Description	<input type="text" value="N/A"/>
Carrier Equipment	<input type="checkbox"/> Converter Dolly <input type="checkbox"/> N/A
Carrier Information	<input type="checkbox"/> N/A
Carrier Rating	<input type="checkbox"/> N/A
Carrier Status	<input type="checkbox"/> OK <input type="checkbox"/> Cancel <input type="checkbox"/> Clear
Carrier Type	<input type="checkbox"/> Ship <input type="checkbox"/> Rail <input type="checkbox"/> Air <input type="checkbox"/> Either/Or <input type="checkbox"/> Truck
Load Description	<input type="text" value="N/A"/>
Load Details	<input type="checkbox"/> N/A
Load Status	<input type="checkbox"/> N/A
Load Type	<input type="checkbox"/> N/A
Location	<input type="text" value="N/A"/>
Notes	<input type="text" value="N/A"/>
Owner	<input type="text" value="N/A"/>
Owner Address	<input type="text" value="N/A"/>
Owner City	<input type="text" value="N/A"/>
Owner Country	<input type="text" value="N/A"/>
Owner Email	<input type="text" value="N/A"/>
Owner Name	<input type="text" value="N/A"/>
Owner Phone	<input type="text" value="N/A"/>
Owner Postcode	<input type="text" value="N/A"/>
Owner State	<input type="text" value="N/A"/>
Owner Street	<input type="text" value="N/A"/>
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Owner Zip215	<input type="text" value="N/A"/>
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Owner Zip227	<input type="text" value="N/A"/>
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Owner Zip246	<input type="text" value="N/A"/>
Owner Zip247	<input type="text" value="N/A"/>
Owner Zip248	<input type="text" value="N/A"/>
Owner Zip249	<input type="text" value="N/A"/>
Owner Zip250	<input type="text" value="N/A"/>
Owner Zip251	<input type="text" value="N/A"/>
Owner Zip252	<input type="text" value="N/A"/>
Owner Zip253	<input type="text" value="N/A"/>
Owner Zip254	<input type="text" value="N/A"/>
Owner Zip255	<input type="text" value="N/A"/>
Owner Zip256	<input type="text" value="N/A"/>
Owner Zip257	<input type="text" value="N/A"/>
Owner Zip258	<input type="text" value="N/A"/>
Owner Zip259	<input type="text" value="N/A"/>
Owner Zip260	<input type="text" value="N/A"/>
Owner Zip261	<input type="text" value="N/A"/>
Owner Zip262	<input type="text" value="N/A"/>
Owner Zip263	<input type="text" value="N/A"/>
Owner Zip264	<input type="text" value="N/A"/>
Owner Zip265	<input type="text" value="N/A"/>
Owner Zip266	<input type="text" value="N/A"/>
Owner Zip267	<input type="text" value="N/A"/>
Owner Zip268	<input type="text" value="N/A"/>
Owner Zip269	<input type="text" value="N/A"/>
Owner Zip270	<input type="text" value="N/A"/>
Owner Zip271	<input type="text" value="N/A"/>
Owner Zip272	<input type="text" value="N/A"/>
Owner Zip273	<input type="text" value="N/A"/>
Owner Zip274	<input type="text" value="N/A"/>
Owner Zip275	<input type="text" value="N/A"/>
Owner Zip276	<input type="text" value="N/A"/>
Owner Zip277	<input type="text" value="N/A"/>
Owner Zip278	<input type="text" value="N/A"/>
Owner Zip279	<input type="text" value="N/A"/>
Owner Zip280	<input type="text" value="N/A"/>
Owner Zip281	<input type="text" value="N/A"/>
Owner Zip282	<input type="text" value="N/A"/>
Owner Zip283	<input type="text" value="N/A"/>
Owner Zip284	<input type="text" value="N/A"/>
Owner Zip285	<input type="text" value="N/A"/>
Owner Zip286	<input type="text" value="N/A"/>
Owner Zip287	<input type="text" value="N/A"/>
Owner Zip288	<input type="text" value="N/A"/>
Owner Zip289	<input type="text" value="N/A"/>
Owner Zip290	<input type="text" value="N/A"/>
Owner Zip291	<input type="text" value="N/A"/>
Owner Zip292	<input type="text" value="N/A"/>
Owner Zip293	<input type="text" value="N/A"/>
Owner Zip294	<input type="text" value="N/A"/>
Owner Zip295	<input type="text" value="N/A"/>
Owner Zip296	<input type="text" value="N/A"/>
Owner Zip297	<input type="text" value="N/A"/>
Owner Zip298	<input type="text" value="N/A"/>
Owner Zip299	<input type="text" value="N/A"/>
Owner Zip300	<input type="text" value="N/A"/>
Owner Zip301	<input type="text" value="N/A"/>
Owner Zip302	<input type="text" value="N/A"/>
Owner Zip303	<input type="text" value="N/A"/>
Owner Zip304	<input type="text" value="N/A"/>
Owner Zip305	<input type="text" value="N/A"/>
Owner Zip306	<input type="text" value="N/A"/>
Owner Zip307	<input type="text" value="N/A"/>
Owner Zip308	<input type="text" value="N/A"/>
Owner Zip309	<input type="text" value="N/A"/>
Owner Zip310	<input type="text" value="N/A"/>
Owner Zip311	<input type="text" value="N/A"/>
Owner Zip312	<input type="text" value="N/A"/>
Owner Zip313	<input type="text" value="N/A"/>
Owner Zip314	<input type="text" value="N/A"/>
Owner Zip315	<input type="text" value="N/A"/>
Owner Zip316	<input type="text" value="N/A"/>
Owner Zip317	<input type="text" value="N/A"/>
Owner Zip318	<input type="text" value="N/A"/>
Owner Zip319	<input type="text" value="N/A"/>
Owner Zip320	<input type="text" value="N/A"/>
Owner Zip321	<input type="text" value="N/A"/>
Owner Zip322	<input type="text" value="N/A"/>
Owner Zip323	<input type="text" value="N/A"/>
Owner Zip324	<input type="text" value="N/A"/>
Owner Zip325	<input type="text" value="N/A"/>
Owner Zip326	<input type="text" value="N/A"/>
Owner Zip327	<input type="text" value="N/A"/>
Owner Zip328	<input type="text" value="N/A"/>
Owner Zip329	<input type="text" value="N/A"/>
Owner Zip330	<input type="text" value="N/A"/>
Owner Zip331	<input type="text" value="N/A"/>
Owner Zip332	<input type="text" value="N/A"/>
Owner Zip333	<input type="text" value="N/A"/>
Owner Zip334	<input type="text" value="N/A"/>
Owner Zip335	<input type="text" value="N/A"/>
Owner Zip336	<input type="text" value="N/A"/>
Owner Zip337	<input type="text" value="N/A"/>
Owner Zip338	<input type="text" value="N/A"/>
Owner Zip339	<input type="text" value="N/A"/>
Owner Zip340	<input type="text" value="N/A"/>
Owner Zip341	<input type="text" value="N/A"/>
Owner Zip342	<input type="text" value="N/A"/>
Owner Zip343	<input type="text" value="N/A"/>
Owner Zip344	<input type="text" value="N/A"/>
Owner Zip345	<input type="text" value="N/A"/>
Owner Zip346	<input type="text" value="N/A"/>
Owner Zip347	<input type="text" value="N/A"/>
Owner Zip348	<input type="text" value="N/A"/>
Owner Zip349	<input type="text" value="N/A"/>
Owner Zip350	<input type="text" value="N/A"/>
Owner Zip351	<input type="text" value="N/A"/>
Owner Zip352	<input type="text" value="N/A"/>
Owner Zip353	<input type="text" value="N/A"/>
Owner Zip354	<input type="text" value="N/A"/>
Owner Zip355	<input type="text" value="N/A"/>
Owner Zip356	<input type="text" value="N/A"/>
Owner Zip357	<input type="text" value="N/A"/>
Owner Zip358	<input type="text" value="N/A"/>
Owner Zip359	<input type="text" value="N/A"/>
Owner Zip360	<input type="text" value="N/A"/>
Owner Zip361	<input type

Fig. 3j

N Carrier Qualifications Screen	
Min. On Time Delivery (%)	N/A
Min. Damage Free Delivery (%)	N/A
Min. DOT Rating	N/A
Min. Auto Liability	N/A
Min. Cargo Liability	N/A
Carrier Area	Carrier Annual Revenue
Min.	Max.
N/A	50,000,000
N/A	N/A
Carrier County	Min. Size
0	100,000
N/A	500,000
Driver Safety Program	Union/Nat'l Union
Min.	Max.
N/A	1,000,000
N/A	5,000,000
N/A	10,000,000
Communications	Maintenace Type
Min.	Max.
N/A	50,000,000
N/A	N/A
Carrier Financial Ratings	Non Comp. Employee Interlining Allowed
Driver Specifications	Min. Combined
Carrier Special Services	N/A
Carrier Authority	N/A
OK Cancel Clear	
Unsigned Java Applet Window	
Add Equipment	
Start	
JATN Load Machine	
United Paint	
3:44 PM	

Fig. 3k

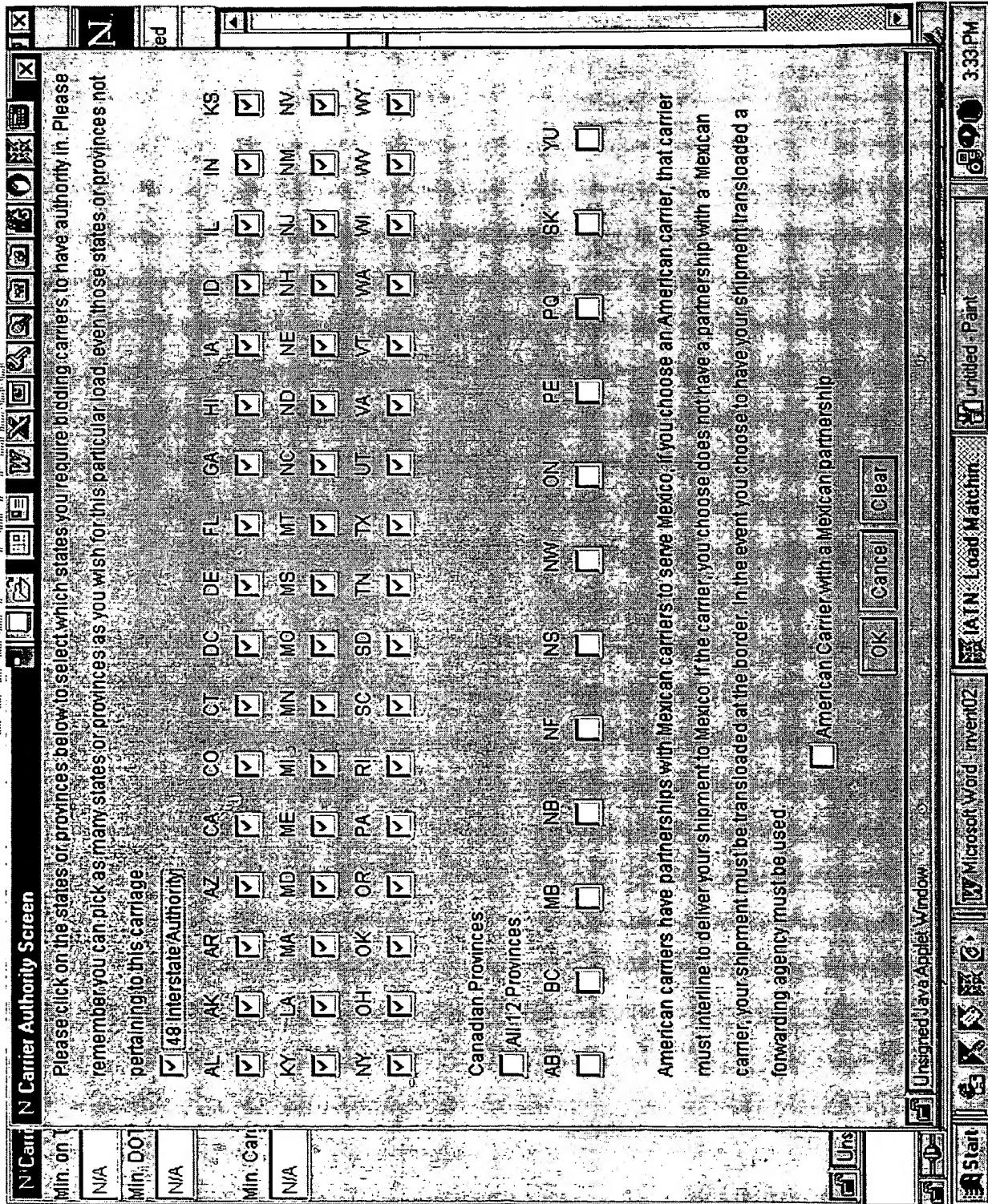
N Carrier Qualifications Screen	
Min. on Time Delivery (%)	Min. Damage Free Delivery (%)
N/A	N/A
N Driver Specifications Screen	
Min. Company Board	Min. Driver Load Type
Type: Experience (years)	Experience (years)
Min. Car.	N/A
Max. DO	Max. Driver Moving
Min. Driver Accidents	Max. Driver Moving
Violations last 5 years	Violations last 5 years
Team Drivers	Team Drivers
Min.	Max.
N/A	N/A
Unsigned Java Applet Window	
Carrier	Carrier
Carrier Country	Carrier Type
Driver Safety Program	Driver Drug Screening
Communications	Hazardous License Req.
Carrier Financial Ratings	Driver Specifications
Carrier Special Services	Carrier Authorization
Unsigned Java Applet Window	
Start	Document Done
Microsoft Word	Microsoft Word - Inventor
Load Master	Load Master
Untitled - Paint	Untitled - Paint
3:23 PM	3:23 PM

Fig. 31

N Carrier Qualifications Screen

Min. DO	N Carrier Special Services Screen	
Min. on Time Delivery (%)	Choose Special Services	
N/A	<input type="checkbox"/> A - Auto and/or Truck Transport <input type="checkbox"/> AB - Alcoholic Beverages <input type="checkbox"/> AC - Agriculture Chemicals <input type="checkbox"/> AF - Air Freight Pick-Up & Delivery Service <input type="checkbox"/> AG - Agriculture Commodities/Produce Hauling <input type="checkbox"/> AP - Airplane and/or Parts	
Max	<input type="checkbox"/> Unsigned Java Applet Window <input type="checkbox"/> OK <input type="checkbox"/> Cancel <input type="checkbox"/> Clear	
N/A	<input type="checkbox"/> Carrier Country <input type="checkbox"/> Carrier Type <input type="checkbox"/> Union/Non-Union <input type="checkbox"/> Maintenance Type	
N/A	<input type="checkbox"/> Driver Safety Program <input type="checkbox"/> Driver Drug Screening <input type="checkbox"/> Work Comp Eligible <input type="checkbox"/> Interlining Allowed	
N/A	<input type="checkbox"/> Communications <input type="checkbox"/> Hazardous License Req.	
N/A	<input type="checkbox"/> Carrier Financial Ratings <input type="checkbox"/> Driver Specifications <input type="checkbox"/> Hazardous License Req.	
N/A	<input type="checkbox"/> Carrier Special Services <input type="checkbox"/> Carrier Authority <input type="checkbox"/> OK <input type="checkbox"/> Cancel <input type="checkbox"/> Clear	
<input type="checkbox"/> Unsigned Java Applet Window <input type="checkbox"/> Add Equipment		
<input type="checkbox"/> Start <input type="checkbox"/> Stop <input type="checkbox"/> Pause <input type="checkbox"/> Resume <input type="checkbox"/> Stop Watch <input type="checkbox"/> Load Hatchin		
<input type="checkbox"/> Min Damage Fee Delivery (%) <input type="checkbox"/> Min Trans/Log Rating <input type="checkbox"/> Min Excess Liability <input type="checkbox"/> Min Combined Liability <input type="checkbox"/> N/A <input type="checkbox"/> N/A <input type="checkbox"/> N/A <input type="checkbox"/> N/A <input type="checkbox"/> Min Size <input type="checkbox"/> N/A <input type="checkbox"/> N/A <input type="checkbox"/> N/A <input type="checkbox"/> # of Carrier Employees <input type="checkbox"/> Carrier Class <input type="checkbox"/> N/A <input type="checkbox"/> N/A <input type="checkbox"/> N/A <input type="checkbox"/> N/A <input type="checkbox"/> N/A <input type="checkbox"/> N/A <input type="checkbox"/> N/A <input type="checkbox"/> N/A <input type="checkbox"/> N/A <input type="checkbox"/> N/A <input type="checkbox"/> N/A <input type="checkbox"/> N/A <input type="checkbox"/> N/A <input type="checkbox"/> N/A <input type="checkbox"/> N/A <input type="checkbox"/> N/A		

Fig. 3m



Invitation To Bid

Please Enter a Bid Amount: US \$ Last Accepted Bid: Monday , 19 April

Phone: 1-800-866-IATN Fax:
 1-800-952-1194

Trans/log Number: 970501000503672

50

51

52

STOPS		Date & Time			Plus	Minus	Miles
Origin	AUSTIN	TX	US	20 Apr 1999 08:00 AM			
Destin	TEXAS CITY	TX	US	21 Apr 1999 05:00 PM			202
Total Mileage (Calculated By PC Miler)							202

53

SHIPPER INFORMATION

Shipper Type =Independent Shipper	Annual Rev = 245000000	Employee Cnt = 220
D&B = pending	S&P = pending	CCA = pending
Moodys = pending		

54

LOAD TYPE	TRANSPORT MODE
Load Information = TL	Transport Mode = TRUCK

55

Trailer Equipment:		
Van or Reefer	Len Min = 48	Tandem Type =
Extendible Length Min =	Wheels =	Length Max =
Lift Gate Service =	Extendible Length Max =	Height Max =
Axles =	Trailer Age Max =	Height Min =
Num Of Trailers =	Van Shape =	Width Min = 102
Doors =	Van Type =	

Additional Information

The Commodity to be shipped is GARBAGE BAGS.

The Carrier Must hold this Bid until 3:00:00 PM 04/19/1999.

22 Pallets/Exchange

The Weight of this load is 41,600 LBS.

FIG. 4

DOOR TO DOOR TRUCKING

N

File Edit View Go Communicator Help

Back Forward Reload Home Search Netscape Print Security Stop

Bookmarks Netwiz [http://staging2.evn3.all.net:9719/cgi-bin/signon.cgi] What's New?

IATN SHIP2

Bert 7 Report } 60
Translog Number:
970501000507352 }

Shipper Load ID: 61

Simple RFB

Complete RFB

Bid Summary

New Services

Home

62

STOPS		Date & Time	Plus	Minus	Miles
Origin	ABBOTT	KY	26 Apr 1999 08:00 AM	:	:
Destn	ROCKLAND	PA	27 Apr 1999 05:00 PM	:	411
Total Mileage (Calculated By PC Miller)					411

	1	2	3	4
RFB Information				

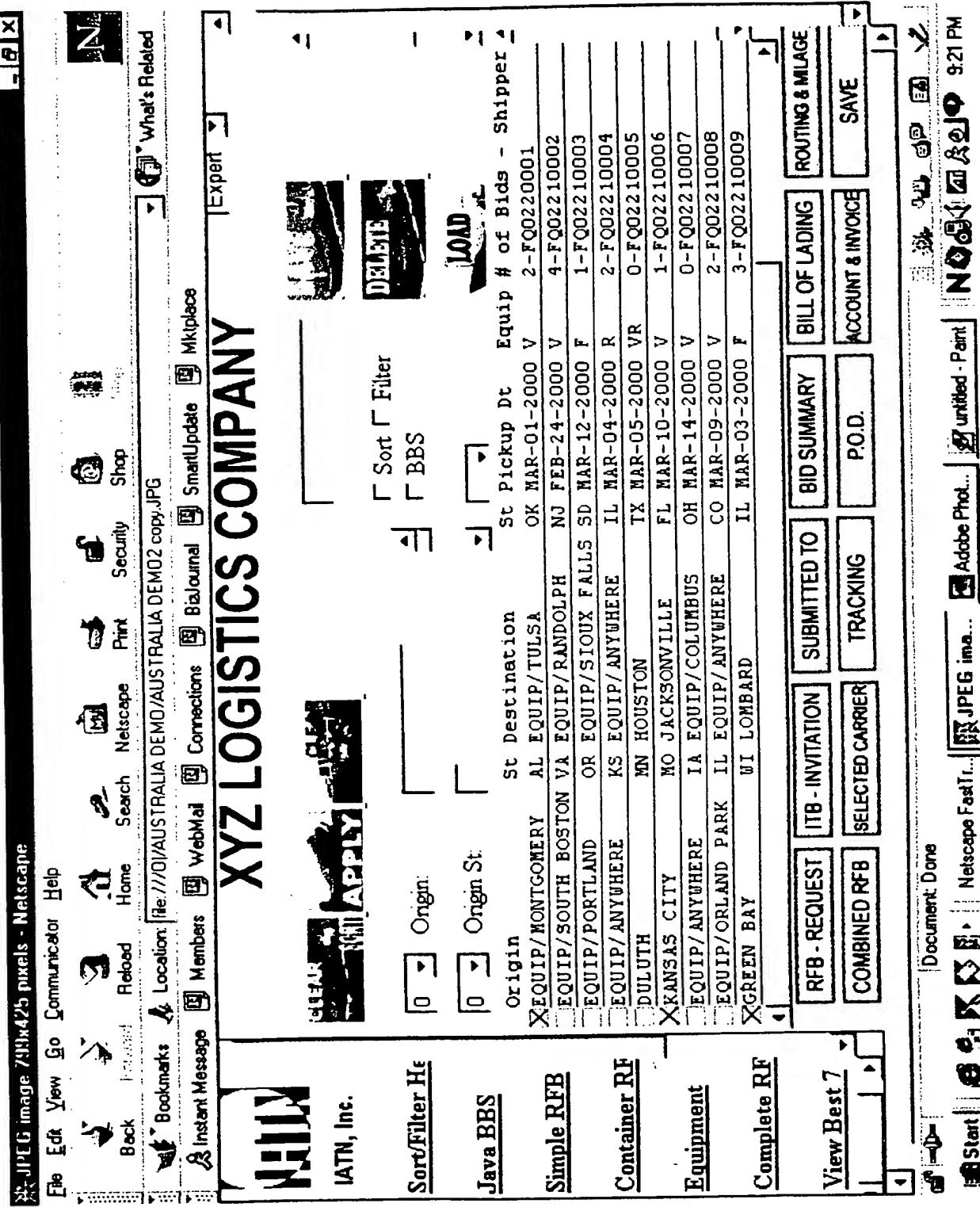
Maximum Bid Amount	0.00	395.00	411.00	425.00	475.00
Actual Bids		Y	Y	Y	INT
Team Drivers					
Maintenance					
Hazardous					
Driver Experience Min					
Apple SOS Started					

62

38 45 49 52

FIG. 5

Fig. 6



110 822 T 12115 2.60

MAIN Load Matching - Freight Matching - Freight Itriding - Logistics - Netscape

File Edit View Go Communicator Help

Back Forward Reload Home Search Netscape Print Security Stop

Bookmarks Netscape http://www.ian.com/Tour/canidemopage.html What's New

Instant Message Member WebMail Connections Balcome SmartUpdate Multiple

N

Empty Containers/Open Loads

Double Click on Postings to View an Invitation to Bid

Origin	St.	Destination	St.	Price	Sh.	Delivery D.	Locality	Priority
CHICAGO	IL	LOS ANGELES	CA	MAR-24-1999	D4	40		
BOSTON	MA	CHICAGO	IL	APR-01-1999	D4	40		
BOSTON	MA	CHICAGO	IL	APR-01-1999	JUN-30-1999	D4	40	
BOSTON	MA	CHICAGO	IL	APR-01-1999	D4	40		
KEARNY	NJ	CHICAGO	IL	APR-01-1999	D7	45		
BOSTON	MA	CHICAGO	IL	APR-01-1999	JUN-30-1999	D4	40	
KEARNY	NJ	CHICAGO	IL	APR-01-1999	D7	45		
BOSTON	MA	CHICAGO	IL	APR-01-1999	JUN-30-1999	D7	45	
KEARNY	NJ	COLUMBUS	OH	APR-01-1999	D4	40		
BOSTON	MA	COLUMBUS	OH	APR-01-1999	JUN-30-1999	D4	40	
KEARNY	NJ	COLUMBUS	OH	APR-01-1999	D4	40		
BOSTON	MA	COLUMBUS	OH	APR-01-1999	JUN-30-1999	D7	45	
KEARNY	NJ	COLUMBUS	OH	APR-01-1999	D7	45		
BOSTON	MA	COLUMBUS	OH	APR-01-1999	D7	45		
KEARNY	NJ	SAIN T LOUIS	MO	APR-01-1999	JUN-30-1999	D7	45	
BOSTON	MA	SAIN T LOUIS	MO	APR-01-1999	JUN-30-1999	D7	45	

Member Loads

Container Board

Container Info

New Services

Home

*Click on any Column Heading to Sort Postings
Requires Multiple Frame Types*

If the Grid does not appear, Your browser does not support Java v1.1.

Start **Get XLS** Release Fee LATN: L... Shuted Period P... 11:35 AM

FIG. 7

FIG. 8

File Edit View Go Communicator Help

Back Forward Reload Home Search Netscape Print Security Scan

Bookmarks Bookmarks http://steering2.ew3.att.net:9719/cgi-bin/signon.cgi

File Edit View Go Communicator Help

Back Forward Reload Home Search Netscape Print Security Scan

Bookmarks Bookmarks http://steering2.ew3.att.net:9719/cgi-bin/signon.cgi

IATN SHIP2

Your Selection for Translog Number > 66
970501000504109

Carrier Name: Swift Transportation — 670

Contact Name: Jerry Clyborne — 678

Phone Number: (800)800-2200 {
Operations and route to Translog Number
970501000504109.

69

65

Simple RFB

Complete RFB

Bid Summary

New Services

Home

Document Done

N

SHIPPER PROFILE

COMPANY NAME _____

ADDRESS _____

BILLING ADDRESS _____

CONTACT PERSON _____

ADDRESS _____

PHONE NO. _____

FAX NO. _____

E-MAIL _____

38

AUTHORIZATION NO. _____

39

DAILY WEEKLY MO.

NONE

FIXED
(4 DIGITS)

VARIABLE

APPROX. ANNUAL REVENUE _____

40

APPROX. NO. OF EMPLOYEES _____

DUN & BRADSTREET

41

MOODY'S

STANDARD & POOR'S

YOUR CO. FUNCTIONS AS:

42

SHIPPER CARRIER BROKER FWD 3PL

YOUR CO. IS RUN BY:

FIG. 9

CARRIER PROFILE

COMPANY NAME _____

ADDRESS _____

BILLING ADDRESS _____

CONTACT PERSON _____

ADDRESS _____

PHONE NO. _____

FAX NO. _____

E-MAIL _____

AUTHORIZATION NO.

DAILY WEEKLY MO.

NONE

FIXED
(4 DIGITS)

--	--	--	--

VARIABLE

MEMBER

SHIPPER CARRIER BROKER FWD 3PL

INTERLINING

TYPE

APPROX. ANNUAL

REVENUE _____

APPROX. NO.

OF EMPLOYEES _____

YES

NO

DUN & BRADSTREET

DOT RATING

ON TIME DELIVERY _____

%

DAMAGE FREE DELIVERY _____

%

TEAM DRIVERS/ SLEEPERS/INTERNAL MAINT./ HAZARDOUS LICENSE

FIG. 10a

DRIVER AND VEHICLE SAFETY INFORMATION

INSURANCE INFORMATION

INTERSTATE
SERVICE
AREA

CANADA

SERVICES
OFFERED

AREA OF TYPE OF CARRIER
CARRIER

LOAD COMMUNICATIONS
TYPE

FIG. 10b

09754121 • 422200

INTERMODAL CAPABILITIES

AIR

RAIL

SHIP

TRUCK

ALL COMMODITIES?

YES

ND

FIG. 10c

卷之三

Number of trailers: _____

Newest trailer age: _____

Newest trailer age: _____

Straight Truck: _____

TRAILER TYPE	DT	DFF	→
LENGTH			
	20		
	26		
	57		
WIDTH			
	96		
	102		
	OV		
HEIGHT			
	12/6		
	14/6		
SIDES			
WHEELS			
AXLES			
DOORS			
HEATED			
LIFT GATE			
EXTENDIBLES			
TANDEMS			

FIG. 10d

CARRIER PROFILE RULES AND CHARGES

PLEASE PRINT COMPANY RULES AND CHARGES OR PUT "N/A"

NUMBER OF HOURS LATE

BEFORE LOAD IS FREE
DELAYED OR DETAINED

POWER UNITS

CHARGE PER 15 MIN. LATE

ADVANCING CHARGES



FIG. 10e